PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application	or Do	ocket	Numbe
0120	つつ	1	11

04972916

CLAIMS AS FILED - PART (Column 1)		(Column 2)			SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY										
TO	TAL CLAIMS		26/	'	1						RATE	FEE						
						-	RATE	FEE										
FOR		NUMBER FILED		NUMBE	NUMBER EXTRA		ASIC FEE	370.00	OR	BASIC FEE	740.00							
TOTAL CHARGEABLE CLAIMS		/ minus 20=		*			X\$ 9=		OR	X\$18=	18							
INDEPENDENT CLAIMS			/ minus 3 =					X42=		OR	X84=							
MULTIPLE DEPENDENT CLAIM PRESENT			-				+140=		OR	+280=								
* If the difference in column 1 is less than zero, enter "				er "0" in c	olumn 2	<u>L</u>	TOTAL		OR	TOTAL	758							
CLAIMS AS AMENDED - PART II									-	OTHER	THAN							
(Column 1) (Column 2) (Column 3)						SMALL E	YTITM	OR	SMALL	ENTITY								
AWENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	V	RATE	ADDI- TIONAL FEE						
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=							
AME	Independent	*	Minus	***	IT OLAMA			X42=		OR	X84=	-						
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	-ENDEN	II CLAIM			+140=		OR	+280=							
							L	TOTAL		OR	TOTAL ADDIT. FEE							
		(Calum- 4)		(Cal-	ımn 3/	(Column 3)	Al	DDIT. FEE		J	AUUII. FEE							
		(Column 1) CLAIMS		HIG	ımn 2) HEST				ADDI-	1		ADDI-						
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL						
NDW(Total	*	Minus	**		=		X\$ 9=		OR	X\$18=							
LME	Independent	*	Minus	***		=		X42=	7	OR	X84=							
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					J -			1									
		BEST A	ian ari	E C	OPY			+140=		OR								
!			♥ # W W W W W W W W W		- - ·		Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE							
		(Column 1)		(Colt	ımn 2)	(Column 3)												
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=	:						
	Independent	*	Minus	***		=		X42=		OR	X84=							
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	IT CLAIM] -				000							
	if the entire in a le	mn 1 is loss than t	ho entry in cal-	ımn 2 wei	ito "O" in co	lumn 3	L	+140=		OR	+280=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."																		
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Indepen	dent) is the	highest numbe	er foun	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										